oplication or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

0979 2909-4998

CLAIMS AS FILED - PART I					1	SMALL ENTI			ITITY	Y OTHER THAN			
			(Column 1)		(Column 2)		٦	TYPE		OR			
TOTAL CLAIMS			53				Ī	RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBE	NUMBER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	· 710.00	
TOTAL CHARGEABLE CLAIMS			(3 minus 20=		• 33			X\$ 9=	594	OR	X\$18=		
INDEPENDENT CLAIMS 2 mir				nus 3 =	* 4			X40=		OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2	,	TOTAL	949	OR	TOTAL		
CLAIMS AS AMENDED - PAR'					TII				1.	J	OTHER	THAN	
(Column 1) (Colum						(Column 3)	_	SMALL E	NTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total		Minus :	**		= .		X\$ 9=		OR	X\$18=		
	Independent	NITATION OF M	Minus	***	T OL AINA	=		X40=		OR	X80=		
L	FIRST PRESE			+135=		OR	+270=						
								TOTAL			TOTAL		
ADDIT. FEE										£.			
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST											4801		
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	AMENDMENT	Minus	**	····	=	1	X\$ 9=	- I backer	OR	X\$18=		
	Independent	•	Minus	***		<u> </u>]	X40=		OR	X80=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT				T CLAIM		J	+135=		OR	+270=		
		1					L	TOTAL			TOTAL ADDIT. FEE		
÷.		(Column 1)		(Čalu	mn 2)	(Column 3)		ADDIT. FEE			ADDII. FEEI		
_		(Column 1) CLAIMS		HIGH	HEST	(Column 3)	,		ADDI-			ADDI-	
AMENDMENT C		REMAINING AFTER AMENDMENT		PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL	
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	•	Minus	***		=]	X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDEN				T CLAIM	$\Box\Box$	J ∤						
+135= OR											+270=		
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
l	'It the "Highest Nu The "Highest Nur						er for	ind in the ani	ronriate bo	r in co	lumn 1		